Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER California Ambulatory Surgery Association PAC		Date of This Filing03/13/2023	Date Stamp	CALIFORNIA 497
AREA CODE/PHONE NUMBER (916)706-2677	I.D. NUMBER (if applicable) 1254059	Report No		For Official Use Only
STREET ADDRESS		Amendment to Report No.	Page 1 of 10	
CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages 10		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
01/03/2023	Endoscopy Center of South Sacramento Sacramento, CA 95823	☐ IND☐ COM☐ OTH☐ PTY		\$400.00
01/02/2022	Memo Reference: F497P1.INC1847	□ SCC		ф1 225 00
01/03/2023	Inland Surgery Center Redlands, CA 92373	☐ IND☐ COM☐ OTH☐ PTY		\$1,325.00
	Memo Reference: F497P1.INC1846	□ scc		
01/09/2023	De La Vina Surgery Center Santa Barbara, CA 93105	☐ IND☐ COM☐ OTH☐ PTY		\$500.00
	Memo Reference: F497P1.INC1849	□ scc		

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IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

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CITY Sacramento	STATE ZIP CODE CA 95814	No. of Pages10		

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01/09/2023	Milennium Surgery Center Bakersfield, CA 93301 Memo Reference: F497P1.INC1854	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$1,000.00
01/10/2023	Rancho Mirage Pain Center, Inc. Rancho Mirage, CA 92270 Memo Reference: F497P1.INC1853	□ IND □ COM ■ OTH □ PTY □ SCC		\$100.00
01/11/2023	Beach District Surgery Center Redondo Beach, CA 90277 Memo Reference: F497P1.INC1851	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$100.00

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CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages 10		

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01/12/2023	Specialty Surgery Center of Encino Encino, CA 91436 Memo Reference: F497P1.INC1850	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$200.00
01/14/2023	North Point Surgery Center Fresno, CA 93711 Memo Reference: F497P1.INC1859	□ IND □ COM ■ OTH □ PTY □ SCC		\$100.00
01/17/2023	Aspen Surgery Center Vallejo, CA 94589 Memo Reference: F497P1.INC1856	□ IND □ COM ■ OTH □ PTY □ SCC		\$500.00

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LATE CONTRIBUTION REPORT

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STREET ADDRESS		Amendment to Report No.	Page 4 of 10	
CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages 10		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
01/17/2023	Hacienda Surgery Center Pleasanton, CA 94588 Memo Reference: F497P1.INC1857	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$1,000.00
01/26/2023	DISC Surgery Center at Newport Beach Newport Beach, CA 92660 Memo Reference: F497P1.INC1858	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$500.00
02/06/2023	Bakersfield Specialists Surgery Center Bakersfield, CA 93306	□ IND □ COM ■ OTH □ PTY □ SCC		\$500.00

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LATE CONTRIBUTION REPORT

NAME OF FILER California Ambulatory Surgery Association	n PAC	Date of This Filing	Date 03/13/2023	e Stamp	CALIFORNIA 497	
AREA CODE/PHONE NUMBER (916)706-2677	I.D. NUMBER (if applicable) 1254059	Report No.	2023-1		For Official Use Only	
STREET ADDRESS		Amendment to Report No.	Page	5 of 10		
CITY Sacramento		P CODE (explain below) No. of Pages	10			
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Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/06/2023	Truxtun Surgery Center Bakersfield, CA 93309	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$100.00
02/13/2023	Capitola Surgery Center Capitola, CA 95010	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$500.00
02/13/2023	Monterey Peninsula Surgery Center, LLC(David Awerbuck) Monterey, CA 93940	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$8,100.00

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OTH - Other	

Reason for Amendment:

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LATE CONTRIBUTION REPORT

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STREET ADDRESS		Amendment to Report No.		Page 6 of 10		
CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages	10			
Late Contribution(s) Received					
DATE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIL	BUTOR	CONTRIBUTOR	IF AN INDIVIDUAL ENTER OCCUPATION AND E	MPLOYER AMOUNT	

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/21/2023	Providence Holy Cross Surgery Center Mission Hills, CA 91345	☐ IND☐ COM☐ OTH☐ PTY		\$1,050.00
	Memo Reference: F497P1.INC1864	□ scc		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		

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Reason for Amendment:

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LATE CONTRIBUTION REPORT

NAME OF FILER California Ambulatory Surgery Association PA	a.C	Date of This Filling03/13/2023	Date Stamp	CALIFORNIA 497
AREA CODE/PHONE NUMBER (916)706-2677	I.D. NUMBER (if applicable) 1254059	Report No		For Official Use Only
STREET ADDRESS	·	Amendment to Report No.	Page 7 of 10	
CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages		

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
03/13/2023	California Democratic Party Sacramento, CA 95814	California Democratic Party	\$25,000.00	
	ID# 741666			

Reason for Amendment:

M P. f F407D1 INC1047
Memo Reference: F497P1.INC1847 Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Memo Reference: F497P1.INC1846
Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Memo Reference: F497P1.INC1849 Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Memo Reference: F497P1.INC1854 Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Intermediary: CA Amburatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829

Mana Pafananan E407D1 INC1 052
Memo Reference: F497P1.INC1853 Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Memo Reference: F497P1.INC1851
Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Memo Reference: F497P1.INC1850 Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 93829
Memo Reference: F497P1.INC1859
Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829

M D. f
Memo Reference: F497P1.INC1856 Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Memo Reference: F497P1.INC1857
Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Memo Reference: F497P1.INC1858 Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 95829
Intermediary: CA Ambulatory Surgery Assn, P.O. Box 292698, Sacramento, CA 93829
Memo Reference: F497P1.INC1864
Intermediary: CA Ambulatory Surgery Association, P.O. Box 292698, Sacramento, CA 95829